

511 E  
830/00

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SHO	75316	6/26/00
O.I.P.E. CLASSIFIER		(20)	7/1
FORMALITY REVIEW	HA	358	08-30-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
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Claim	Date
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Original	
51	9/02
52	5/03
53	8/03
54	11/03
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79	✓ ✓ ✓ ✓
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84	✓ ✓ ✓
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100	✓ ✓ ✓

Claim	Date
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118	✓ ✓ ✓
119	✓ ✓ ✓
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If more than 150 claims or 10 actions  
 staple additional sheet here

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